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(Requestor's Name)

(Address)

(Address)

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PICK-UP WAIT MAIL

(Business Entity Name)

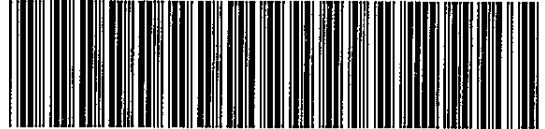
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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STONE & GERKEN, P.A.

ATTORNEYS AT LAW

4850 N. Highway 19A
Mount Dora, Florida 32757
(352) 357-0330
Main Fax (352) 357-2474
Lakeside Office Fax (352) 357-5445

LEWIS W. STONE

SCOTT A. GERKEN

April 12, 2006

Via Overnight Delivery

Department of State
Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399

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TALLAHASSEE, FLORIDA

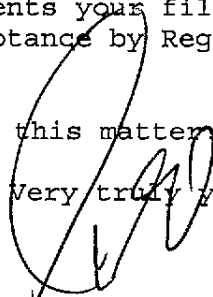
Re: Choice Title of Central Florida, L.L.C.

Dear Sir or Madam:

Enclosed please find the original and copy of the Articles of Organization for the above referenced corporation. Also, enclosed is a check in the amount of \$155.00 which represents your filing fee for the Articles of Organization, Designation of the Acceptance by Registered Agent and certified copy of Articles of Organization.

Thank you for your assistance in this matter.

Very truly yours,


Scott A. Gerken

SAG:tf
Enclosures

**ARTICLES OF ORGANIZATION
OF
CHOICE TITLE OF CENTRAL FLORIDA, L.L.C.**

**ARTICLE I
NAME**

The name of this Limited Liability Company is **CHOICE TITLE OF CENTRAL FLORIDA, L.L.C.**

**ARTICLE II
ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 4850 North Highway 19A, Mount Dora, Florida 32757.

**ARTICLE III
MANAGEMENT**

This Limited Liability Company shall be a manager-managed company. The initial manager shall be **SCOTT A. GERKEN** whose address is 4850 N. Highway 19A, Mount Dora, Florida 32757. Such manager shall continue to manage this Limited Liability Company until a qualified successor is duly elected by a majority in the interest of the members.

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**ARTICLE IV
AMENDMENTS**

These Articles, except for the vested rights of the members, may be amended from time to time by a majority in interest of the members, and the amendments shall be filed, duly signed by all members of the Company, with the Florida Department of State. All members agree to abide by the majority decision and agree to sign the amendments for the purpose of filing with the Florida Department of State.

**ARTICLE V
REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S
SIGNATURE**

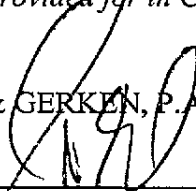
The name and the Florida Street address of the registered agent are:

STONE & GERKEN, P.A.
4850 North Highway 19A
Mount Dora, Florida 32757

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to

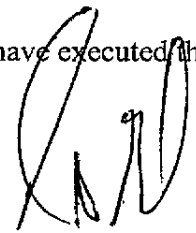
comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

STONE & GERKEN, P.A., registered agent

By: 

Scott A. Gerken, President

IN WITNESS WHEREOF, the parties hereto have executed these Articles of Organization on this 11th day of April, 2006.



**Stone & Gerken, P.A., Member and
Registered Agent by Scott A. Gerken,
President**

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: Choice Title of Central Florida, L.L.C.
2. The name and the Florida street address of the registered agent and office are:

Stone & Gerken, P.A.
4850 North Highway 19A
Mount Dora, Florida 32757

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TALLAHASSEE, FLORIDA

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

STONE & GERKEN, P.A., a Florida professional association, Registered Agent

By: _____
Scott A. Gerken, President

Sworn to and subscribed before me this 11th day of April, 2006 by **SCOTT A. GERKEN**.


NOTARY PUBLIC

Notary Public Printed Name



My Commission Expires:
Commission No.: